

**Success Story 10** Partners Pool Resources To Give Rural Alaska Women Higher

Quality of Care, More Life-Saving Services

Multicultural Care Reflects the Community's Needs

**Location** Rural southeastern Alaska

**Focus** Provide women in this isolated, rural area with much-needed

preventive services such as programs on nutrition, physical

activity, and smoking cessation.

**Strategy** Community partners pooled their resources to provide multicultural

health care services to underserved women in rural Alaska.

**Levels of Success** Many organizational benefits have resulted. By coordinating their

funding sources, agencies have been able to offer more extensive services, including preventive care, to low-income women who previously were unable to receive the care needed to stay healthy.

**Results** Because this WISEWOMAN project has pooled resources with

other agencies in the community, more Alaska Native as well as non-Native women are receiving preventive care. About 500 women in isolated communities have received preventive services through this WISEWOMAN project in the first year of operation.

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## Partners Pool Resources To Give Rural Alaska Women Higher Quality of Care, More Life-Saving Services

Multicultural Care Reflects the Community's Needs

"HRSA funding, which targets

underserved communities with

limited access to care, combined with

the primary preventive services

offered by the SEARHC's WISE-

WOMAN project, is well suited for

rural southeast Alaska. Here, almost

every community faces such health

care shortage issues. Risk factors for

heart disease, such as smoking and

inactivity, are among the highest in

the nation."

In rural southeastern Alaska, programs to help women stop smoking, eat healthier foods, and be physically active often took second place to dealing with the more immediate priorities of providing much-needed primary health care to isolated Alaska Native communities. Two clinics run by the SouthEast Alaska Regional Health Consortium (SEARHC) were struggling financially and provided only limited curative services—one on the isolated Prince of Wales Island and the other at the end of southeast Alaska. Adding to the prob-

lem was the fact that non-Native women were having difficulty getting preventive services.

SEARHC tackled these problems by pooling its resources with those of two strong partners: the Centers for Disease Control and Prevention's WISEWOMAN Program and the Health Resources Services Administration (HRSA)-funded Community Health Centers. Here's how the partnership works:

CDC's WISEWOMAN funds have allowed SEARHC to establish a local WISEWOMAN project that reaches more underserved women with potentially life-saving services. The project provides underserved women with services that aim to lower their risk for heart disease and other diseases services that are not covered by

any other funding. The WISEWOMAN project fills a gap by reducing barriers to care for underserved women and providing preventive health services to non-Native rural women who previously could not get this care easily. WISE-WOMAN also stretches dollars already invested in public health. Providing WISEWOMAN services at HRSA-funded Community Health Centers allows staff to provide women with programs on nutrition, physical activity, and tobacco cessation while working to reduce health disparities—a goal shared by both HRSA and CDC.

HRSA-funded Community Health Centers cover a portion of the medical costs for low-income women under a sliding fee scale. In addition, HRSA funding has helped shore up the clinic in Haines and allowed the SEARHC clinic on Prince of Wales Island to see clients after hours. In addition, HRSA funding allowed SEARHC to provide additional services to Native Alaskan women and, for the first time, to provide access to health care services to all underserved women on the Island. Now, through this partnership, the Alicia

Roberts Medical Center on Prince of Wales Island and the Haines Medical Center have considerably expanded the health care services they offer women.

The SouthEast Alaska Regional Health Consortium covers medical costs for Alaska Native and American Indian women. With Indian Health Services funding, SEARHC manages a hospital and coordinates a network of 11 clinics

> to women in isolated, rural Alaskan villages. Because of this partnership, SEARHC can provide underserved Native and non-Native women with comprehensive health care that meets their prevention and primary care needs.

throughout southeast Alaska, providing a wide range of care

## Importance of Success

Identifying service gaps and multiple sources of funding to fill these gaps allows women in rural areas of Alaska to receive more comprehensive health promotion and disease prevention services. WISEWOMAN funding allows eligible Native women and non-Native women who often have a difficult time receiving such services to gain access to health care services. Care is more multicultural and reflects community needs because community mem-

-Cindy Gamble, Clinic Administrator, Alicia Roberts Medical Center, Klawock, Alaska

> bers provide it. Pooled funds allow SEARHC to offer other medical, pharmacy, and dental services to women while increasing nursing, behavioral health, and health promotion services.

## **Lessons Learned**

- By coordinating resources, you can greatly expand community-based comprehensive health services to underserved populations or communities.
- Realize that applying for supplemental funding takes time but can lead to a return on your investment in health promotion.
- By coordinating different funding sources, you and other agencies in the community can offer underserved women preventive services such as screening for heart disease risk factors and classes to help women stop smoking, eat healthier foods, and be more active. This coordination of effort allows women with limited incomes and some who were previously excluded to receive the care they need to stay healthy.